

RECEIVED
CENTRAL FAX CENTER

MAY 09 2006

Docket No.: 20056-7002
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Wade Spital

Application No.: 10/765,437

Confirmation No.: 1536

Filed: January 26, 2004

Art Unit: 3618

For: WEIGHT-CONTROLLED MOTORIZED
VEHICLE

Examiner: J. Walters

AMENDMENT AFTER FINAL ACTION UNDER 37 C.F.R. 1.116

MS AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

INTRODUCTORY COMMENTS

In response to the Office Action dated March 10, 2006, finally rejecting claims 29-48, please amend the above-identified U.S. patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 11 of this paper.

05/11/2006 EFLORES 00000008 10765437

01 FC:2201	400.00 0P
02 FC:2202	125.00 0P

00006266.DOC

MAY 09 2006

AMENDMENT TRANSMITTAL LETTER				Docket No. 20056-7002	
Application No. 10/765,437-Conf. #1536		Filing Date January 26, 2004		Examiner J. Walters	
Art Unit 3618					
Applicant(s): Wade Spital					
Invention: WEIGHT-CONTROLLED MOTORIZED VEHICLE					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	25	- 20 =	5	x 25	125
Independent Claims	7	- 3 =	4	x 100	400
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					525
<input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>50-3427</u> as described below. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
/Michael E. Woods/ Michael E. Woods Attorney/Agent Reg. No.: 33,466 PATENT LAW OFFICES OF MICHAEL E. WOODS 112 Barn Road Tiburon, California 94920-2602 (415) 388-0830				Dated: <u>May 9, 2006</u>	

PTO/SB/97 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application No. (if known): 10/765,437

Attorney Docket No.: 20056-7002

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office.

on May 9, 2006
Date

/Michael E. Woods/

Signature

Michael E. Woods

Typed or printed name of person signing Certificate

33,466

Registration Number, if applicable

(415) 388-0830

Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Amendment After Final Action Under 37 C.F.R. 1.116 (17 pages)

Amendment Transmittal (1 page)

Payment by credit card. Form PTO-2038 is attached (1 page)

Charge \$525.00 to credit card

MAY 09 2006

FAX TRANSMISSION**DATE:** May 9, 2006**PTO IDENTIFIER:** Application Number 10/765,437-Conf. #1536
Patent Number**Inventor:** Wade Spital**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** PATENT LAW OFFICES OF MICHAEL E. WOODS

Michael E. Woods

PHONE: (415) 388-0830**Attorney Dkt. #:** 20056-7002**PAGES (Including Cover Sheet):** 28**CONTENTS:** Amendment After Final Action Under 37 C.F.R. 1.116 (24 pages)
Amendment Transmittal (1 page)
Payment by credit card. Form PTO-2038 is attached (1 page)
Charge \$525.00 to credit card
Certificate of Transmission (1 page)

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (415) 388-0830 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

PATENT LAW OFFICES OF MICHAEL E. WOODS
112 Barn Road, Tiburon, California 94920-2602
Telephone: (415) 388-0830 **Facsimile:** (415) 388-0860